

INITIAL INSPECTION FORM

Inspector(s): Don Clark, Mark Fitzwater, Matt Culp	Inspection Date: September 12, 2018 Inspection Time: 9:00 am Limiting Conditions:
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I. GENERAL:

Business Name:	Decorative Industrial Plating		
Address:	2531 Dodge Ave Helena, Mt 59601		
Phone:	406-449-6626		
Name and Title of Facility Representative(s) At Inspection:	Decorative Industrial Plating Paul Graham		
Name and Title of Correspondence Contact Person:	Paul Graham Owner		
Type of Business/Operations:	Metal Plating and finishing		
Average Production Rate:	Varies		
Number of Employees:	5	Shifts:	8 am – 5 pm
Normal Days of Operation:	<input checked="" type="checkbox"/> 5 days/week <input type="checkbox"/> 7 days/week <input type="checkbox"/> other _____		
Water Supplied By:	City of Helena		
Is there an Industrial Waste Permit on file for occupant?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		

Decorative Industrial Plating is supplying the City of Helena WWTF with a binder of chemical MSDS sheets labeled with which chemicals are in which tanks.

II. SUPPLY:

Raw Materials/ Chemicals:	Nickel Metal	Nickel sulfate	Nickel chloride	Zincate	Sulfuric acid
Use:	Metal Plating	Metal Plating	Metal Plating	Metal Plating	Metal Plating
Storage Location:	Chemical storage	Chemical storage	Chemical storage	Chemical storage	Chemical storage

Storage
container (AST,
UST, drum, tote,
etc), number
present, and
size:
Staining/
evidence of
spills:

Steel can	Bag	Bag	Plastic Bucket	Plastic Bucket
no	no	no	no	no

SUPPLY continued:

How are supply
chemicals
handled/
transferred to
processing
equipment/
area for use?

By Hand

Floor drains in
storage/
handling/use
areas? (Y/N)

no

Location of
floor drains in
storage or use
area?

n/a

Adequate spill
containment?
(Y/N)

yes

If stored
outside, are
chemicals
covered? (Y/N)

n/a

Potential for
spill to reach
sanitary sewer
or storm sewer?
(Y/N)

no

III. PROCESS/OPERATIONS:

Restaurant/
food
preparation
present?

☐ YES

X NO

If YES, include additional oil/grease information:

Photography,
x-ray, or print
shop?

☐ YES

X NO

If YES, include additional silver information:

[illegible]

**If YES, do floor drains connect to an interceptor?
(Y/N)**

Description of processes/operations at the facility:

Decorative Industrial Plating plates and finishes metals for customers. They have chrome tanks, Nickle tanks, copper tanks, and a small gold plating tank. All of the plating tanks are a closed loop system. D.I.P. has one common electro rinse tank that all of the parts are rinsed in. The electro rinse tank is the only process water that is discharged to the City of Helena WWTF.

DIP is supplying us with a binder full of MSDS sheets that have been labeled with which chemicals are in which tanks.

Sample was taken and delivered to Energy Labs in Helena MT.
Our PH grab sample was 7.3

.New decking installed in 2018

Products:

ON HAND:
Boric – 25#s
Nickle sulfate – 50#s
Nickle Chloride – 50#s
Sulfuric Acid – 0 on hand
Barium – 0 on hand
Brighteners for Nickle and Copper – 5 gallons

PROCESS/OPERATIONS continued:

Floor drain(s) located in process areas?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Potential for spill to reach sanitary sewer?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	If YES, location of each drain:		
Adequate spill containment in process areas?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
	If NO, explain:		

IV. WASTE:**Discharged Waste Streams (to sanitary sewer)**

Waste Streams Discharged to Sanitary Sewer	Volume Generated (Per Day, Month, etc.)	Discharge Frequency
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Process water	3,000 gal per month	continuous
Does the Facility treat the process water in any way before discharging to the sanitary sewer?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
If YES, describe the system and identify the waste streams treated:		

Non-Discharged Waste Streams (any type of liquid or solid waste that is not discharged to the sanitary sewer, except DOMESTIC TRASH) Attach manifests and/or receipts, if applicable.

Waste Streams NOT Discharged to Sanitary Sewer:	Volume Generated (Per Day, Month, etc.):	Storage Location
none		

WASTE continued:

Storage container (AST, UST, drum, tote, etc), number present, and size:					
Staining/ evidence of spills:					
Floor drains in storage area? (Y/N)					
Location of floor drains in storage area?					
Adequate spill containment? (Y/N)					
If stored outside, are wastes covered? (Y/N)					
How is the waste handled/ transferred to its storage area?					
Potential for spill to reach sanitary sewer or storm sewer? (Y/N)					
Waste Transporter/ Destination Records Adequate? (Y/N)					
Evidence of improper disposal/ staining around dumpster(s)?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If YES, describe:			

V. STORMWATER:

	Location
Storm drains present?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
If YES, and process water can reach them, notify Sewer Maintenance.	

VI. ADDITIONAL INFORMATION:**Additional Information**Cooling Waters: ☐ YES ☒ NOBoilers: ☐ YES ☒ NOSpill Plan: ☒ YES ☐ NO

Other:

VII. COMMENTS AND RECOMMENDATIONS:

Comments: All looks good

Recommendations: None

Requirements: None

REPORT COMPLETED BY: *Don Clark Pretreatment Coordinator***DATE:** 9/12/2018**REPORT REVIEWED BY:** Matt Culpo**DATE:** 10/31/18

Photographs:

Fig 1.

Fig 2.

Fig 3.

Fig 4.

Fig 5.

Fig 6.

Fig 7.